PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000									09893102					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			21		,		RAT	Ε	FEE	]	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			∂/ minus 20=		• /		X\$ :	<del>)</del> =	÷	OR	X\$18=	18		
INDEPENDENT CLAIMS			( minus 3 =		3		X40	X40=		OR	X80=	240		
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+13			1	+270=	20		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT			OR OR	TOTAL	CCA		
1		101	HL.	<u> </u>	JOH	OTHER	CGB THAN							
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMA											SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	- 17	Minus	2	.1	- Ø	X\$ 9	=	· V ·	OR	X\$18=			
	Independent	٠ 5	Minus	•••	6	= <b>P</b>	X40	= ;	<b>1</b> 1.	OR	X80=			
Ù	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									ÓR	+270=			
	(Column 1) (Column 2) (Column 3)							Ξ. ΓAL			TOTAL			
								EE	ì	OR	ADDIT. FEE			
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO	EST BER BUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	ا معو	RATE	ADDI- TIONAL FEE		
	Total		Minus	••		=	X\$ 9	_		OR	X\$18=			
	Independent	•	Minus	***		9	X40	_	•	OR	X80=			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										*			
		) (					+135		·	OR	+270=			
		in.,		<b>10.1</b>	01	(0-1 0)	ADDIT. F	EE		OR	ADDIT, FEE			
		(Column 1) CLAIMS	ļ	(Colun	EST	(Column 3)		-1	ADDI :	· •		ADDI		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	••		=	X\$ 9	-		OR	X\$18=			
	Independent	•	Minus	•••		=	X40:	.		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							┪	•					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												:		
•••	If the "Highest Nu If the "Highest Nu	mber Previously Pa mber Previously Pa mber Previously Pai	aid For IN THI aid For IN TH	S SPACE IS	less that iess that	in 20, enter "20." in 3, enter "3."	ADDIT. F	EEL	ropriate box	_	TOTAL ADDIT. FEE umri 1.			

**Application or Docket Number**